

Preprint- Addition of SCHIP Coverage for Prenatal Care and Associated Health Care Services to the State Child Health Plan

State/Territory: State of Washington
(Name of State/Territory)

Section 4. Eligibility Standards and Methodology. (Section 2102(b))

4.1.2.1 Age: conception through birth

4.1.3.1 Income:
0 % of the FPL (and not eligible for Medicaid) through 185 % of the FPL

Effective Date: 11/12/02 (date costs begin to be incurred)
Implementation Date: 11/12/02 (dates services begin to be provided)

Section 9. Strategic Objectives and Performance Goals and Plan Administration (Section 2107)

9.10. Please provide a 1-year projected budget for *all* targeted low-income children covered under the state plan using the attached financial form. Additionally, please provide the following:

- Total 1- year cost of adding prenatal coverage: \$23.8 million
- Estimate of unborn children covered in year 1: 5,775

Effective Date:

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Approval Date:



STATE OF WASHINGTON
DEPARTMENT OF SOCIAL AND HEALTH SERVICES

June 16, 2003

RECEIVED

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Ms. Liz Trias
Centers for Medicare & Medicaid Services
Region X, MS: RX-43
2201 Sixth Avenue
Seattle, Washington 98121

Dear Ms. Trias:

We are submitting for your review and approval an amendment to Washington's Title XXI State Plan. The amendment's effective date is November 12, 2002.

The purpose of this request is to amend the State Plan to provide coverage for prenatal care and associated health services for women with family income up to and including 185 percent of the Federal Poverty Level and who are not eligible to receive such services under the medical assistance program, Title XIX of the federal Social Security Act.

If you have any questions or need further clarification, please contact Laura Piliaris at 360.725.1269 or Diane Kessel at 360.725.1715.

Sincerely,

DENNIS BRADDOCK
Secretary

Enclosure

cc: Doug Porter
Steven Wish
Roger Gantz
Laura Piliaris



SCHIP Budget Plan Template

	FFY 03 Costs	FFY 03 Costs
	SCHIP	Prenatal Care for Non-Citizen Women
Enhanced FMAP rate	65.0%	65.0%
Benefit Costs		
Insurance payments		
Managed care	6,280,203	-
per member/per month rate @ # of eligibles	\$ 73.48	-
Fee for service	4,670,120	22,207,450
Total Benefit Costs	10,950,323	22,207,450
(Offsetting beneficiary cost sharing payments)	(492,754)	-
Net Benefit Costs	10,457,569	22,207,450
Administration Costs		
Personnel	105,000	150,000
General administration	600,000	1,200,000
Contractors/brokers (e.g., enrollment contractors)		
Claims processing	3,500	7,000
Outreach/marketing costs	100,000	200,000
Other		
Total Administration Costs	808,500	1,557,000
10% Administrative Cost Ceiling	1,161,952	2,467,494
Federal Share (multiplied by the enh-FMAP rate)	7,322,945	15,446,893
State Share	3,943,124	8,317,558
Total Program Costs	11,266,069	23,764,450